

State of California
Division of Occupational Safety and Health
Cal/OSHA Process Safety Management District Office
1450 Enea Circle, Suite 550 (Index Code 4037)
Concord, CA 94520-7996
Phone: (925) 602-2665 Fax: (925) 602-2668



Citation and Notification of Penalty

To:
Chevron Products Company

and its successors
841 Chevron Way
Richmond, CA 94801-2006

Inspection Number: 311074876
Inspection Date(s): 11/09/2009 - 02/16/2010

Issuance Date: 02/22/2010
CSHO ID: H1278
Optional Report #: 012-10
Reporting ID: 0950663

Inspection Site:
841 Chevron Way
Richmond, CA 94801-2006

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.

AMENDED CITATION

This Citation and Notification of Penalty (hereinafter Citation) is being issued in accordance with California Labor Code Section 6317 for violations that were found during the inspection/investigation. **This Citation or a copy must be prominently posted upon receipt by the employer at or near the location of each violation until the violative condition is corrected or for three working days, whichever is longer.** Violations of Title 8 of the California Code of Regulations or of the California Labor Code may result in some instances in prosecution for a misdemeanor.

YOU HAVE A RIGHT to contest this Citation and Notification of Penalty by filing an appeal with the Occupational Safety and Health Appeals Board. To initiate your appeal, you **must** contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of this Citation. If you miss the 15 working day deadline to appeal, the Citation and Notification of Penalty becomes a final order of the Appeals Board, not subject to review by any court or agency.

Informal Conference - You may request an informal conference with the Manager of the District Office which issued the Citation within 10 working days after receipt of the Citation. However, if the citation is appealed, you may request an informal conference at any time prior to the day of the hearing. Employers are encouraged to schedule a conference at the earliest possible time to assure an expeditious resolution of any issues. At the informal conference, you may discuss the existence of the alleged violation, classification of the violation, abatement date or proposed penalty.

Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

The Occupational Safety and Health Appeals Board (Appeals Board) consists of three members appointed by the Governor. The Appeals Board is a separate entity from the Division of Occupational Safety and Health (Division) and employs experienced attorneys as administrative law judges to hear appeals fairly and impartially. To initiate an appeal from a Citation and Notification of Penalty, you must contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of a Citation. After you have initiated your appeal, you must then file a completed appeal form with the Appeals Board, at the address listed below, for each contested citation. Failure to file a completed appeal form with the Appeals Board may result in dismissal of the appeal. Appeal forms are available from district offices of the Division, or from the Appeals Board:

Occupational Safety and Health Appeals Board

2520 Venture Oaks Way, Suite 300

Sacramento, CA 95833

Telephone: (916) 274-5751

Fax: (916) 274-5785

If the Citation you are appealing alleges more than one item, you must specify on the appeal form which items you are appealing. You must also attach to the appeal form a legible copy of the Citation you are appealing.

Among the specific grounds for an appeal are the following: the safety order was not violated, the classification of the alleged violation (e.g., serious, repeat, willful) is incorrect, the abatement requirements are unreasonable or the proposed penalty is unreasonable.

Important: You must notify the Appeals Board, not the Division, of your intent to appeal within 15 working days from the date of receipt of the Citation. Otherwise, the Citation and Notification of Penalty becomes a final order of the Appeals Board not subject to review by any court or agency. An informal conference with the Division does not constitute an appeal and does not stay the 15 working day appeal period. If you have any questions concerning your appeal rights, call the Appeals Board, (916) 274-5751.

PENALTY PAYMENT OPTIONS

Penalties are due within 15 working days of receipt of this Citation and Notification of Penalty unless contested. If you are appealing any item of the citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form for payment.

If you are paying by credit card (MasterCard and Visa), please have the Penalty Remittance Form on-hand when you are ready to make our payment. The company name, index code, reporting ID, and Citation number(s) will be required in order to ensure that the payment is accurately posted to your account. Please go to www.dir.ca.gov/dosh to access the secure payment processing site.

If you are paying by check, return one copy of the Citation, along with the Notice of Proposed Penalties Sheet and the Penalty Remittance Form and mail to:

Department of Industrial Relations
Cashier, Accounting Office
P. O. Box 420603
San Francisco, CA 94142-0603

CAL/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

NOTIFICATION OF CORRECTIVE ACTION

For violations which you do not contest, you should notify the Division of Occupational Safety and Health promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation and Notification of Penalty. Please inform the District Office listed on the Citation by submitting the CAL/OSHA Form 160 and/or 161 with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for serious and general violations **has already been** reduced by 50% on the presumption that the employer will correct the violations by the abatement date. **If the CAL/OSHA Form 161 is not received in the District Office within 10 days following the abatement date, the abatement credit is revoked, causing the penalty to double.**

Note: Return the CAL/OSHA Form 160/161 to the District Office listed on the Citation and as shown below:

Division of Occupational Safety and Health
Northern California Process Safety Management District Office
1450 Enea Circle, Suite 550
Concord, CA 94520-7996

EMPLOYEE RIGHTS

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under Labor Code Section 6310 or 6311. An employee who believes that he/she has been discriminated against may file a complaint no later than six (6) months after the discrimination occurred with the Division of Labor Standards Enforcement.

Employee Appeals - An employee or authorized employee's representative may, within 15 working days of the issuance of a citation, special order, or order to take special action, appeal to the Occupational Safety and Health Appeals Board the reasonableness of the period of time fixed by the Division of Occupational Safety and Health (Division) for abatement. An employee appeal may be filed with the Appeals Board or with the Division. No particular format is necessary to initiate the appeal, but the notice of appeal must be in writing.

If an Employee Appeal is filed with the Division, the Division shall note on the face of the document the date of receipt, include any envelope or other proof of the date of mailing, and promptly transmit the document to the Appeals Board. The Division shall, no later than 10 working days from receipt of the Employee Appeal, file with the Appeals Board and serve on each party a clear and concise statement of the reasons why the abatement period prescribed by it is reasonable.

Employee Appeal Forms are available from the Appeals Board, or from a District Office of the Division.

Employees Participation in Informal Conference. Affected employees or their representatives may notify the District Manager that they wish to attend the informal conference. If the employer objects, a separate informal conference will be held.

DISABILITY ACCOMMODATION

Disability accommodation is available upon request. Any person with a disability requiring an accommodation, auxiliary aid or service, or a modification of policies or procedures to ensure effective communication and access to the programs of the Division of Occupational Safety and Health, should contact the Disability Accommodation Coordinator at the local district office or the Statewide Disability Accommodation Coordinator at 1-866-326-1616 (toll free). The Statewide Coordinator can also be reached through the California Relay Service, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY-Spanish).

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.

State of California

Division of Occupational Safety and Health
Cal/OSHA N. CA PSM District Office (0950663;4037)
1450 Enea Circle, Suite 550
Concord, CA 94520-7996

Inspection Number: 311074876
Inspection Dates: 11/09/2009-02/16/2010
Issuance Date: 02/22/2010
CSHO ID: H1278
Optional Inspection Nbr: 012-10



Phone: (925) 602-2665 Fax: (925) 602-2668

Citation and Notification of Penalty

Company Name: Chevron Products Company
Inspection Site: 841 Chevron Way, Richmond, CA 94801-0006

Citation 1 Item 1 Type of Violation: **Nonserious**

3270(c) Access General

Access shall be provided to all equipment and appliances except those located on roofs of dwellings and their accessory buildings:

1 Power Plant: At such time as employees shall be required to access the 150 lb. steam valve in the overhead pipeway, employer shall ensure safe access to the valve.

Date By Which Violation Must be Abated:	03/27/2010
Proposed Penalty:	\$ 0.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

State of California

Division of Occupational Safety and Health

Cal/OSHA N. CA PSM District Office (0950663;4037)

1450 Enea Circle, Suite 550

Concord, CA 94520-7996

Inspection Number: 311074876**Inspection Dates:** 11/09/2009-02/16/2010**Issuance Date:** 02/22/2010**CSHO ID:** H1278**Optional Inspection Nbr:** 012-10

Phone: (925) 602-2665 Fax: (925) 602-2668

Citation and Notification of Penalty**Company Name:** Chevron Products Company**Inspection Site:** 841 Chevron Way, Richmond, CA 94801-0006

AMENDED

"THIS CITATION AMENDS CITATION NO. 1 ISSUED ON 02/22/10; TO CHANGE THE AVD LANGUAGE FOR ITEMS NO. 2 TO REFLECT CORRECT DATE OF OBSERVATION BY CSHO. ALL OTHER ITEMS OF THE CITATION AND PENALTY REMAIN UNCHANGED AND EFFECTIVE. THIS AMENDED CITATION SHALL BE POSTED WITH THE ORIGINAL CITATION FOR AT LEAST THREE WORKING DAYS OR UNTIL THE VIOLATIVE CONDITION IS ABATED, WHICHEVER IS LONGER."

Citation 1 Item 2 Type of Violation: General**3270(d) Access General**

Every permanent pit, sump, or other sunken location 30 inches or more in depth in, or from which, machinery, equipment, or materials are customarily operated or frequently repaired, serviced, adjusted, or otherwise handled shall be provided with a safe means of access. Such means of access shall be provided by means of either portable or fixed ladders or permanent stairways. Note: Access to electrical equipment shall not be less than that required by the Electrical Safety Orders, Title 8, CCR:

11/09/09/1 Power Plant: Employer failed to ensure safe access to the sump pump operating in the basement at the south end of the building. The Cal OSHA Compliance Engineer observed a flexible hose that was positioned in the approximate center of the stairway leading to the basement connected from #5 Boiler Feedwater pump on the main floor of the power plant to the sump pump. The hose obstructed the stairway, creating unsafe access to the pump that was routinely handled by employees.

Date By Which Violation Must be Abated:

03/27/2010

Proposed Penalty:

\$ 150.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

State of California

Division of Occupational Safety and Health
Cal/OSHA N. CA PSM District Office (0950663;4037)
1450 Enea Circle, Suite 550
Concord, CA 94520-7996

Inspection Number: 311074876
Inspection Dates: 11/09/2009-02/16/2010
Issuance Date: 02/22/2010
CSHO ID: H1278
Optional Inspection Nbr: 012-10



Phone: (925) 602-2665 Fax: (925) 602-2668

Citation and Notification of Penalty

Company Name: Chevron Products Company
Inspection Site: 841 Chevron Way, Richmond, CA 94801-0006

AMENDED

"THIS CITATION AMENDS CITATION NO. 1 ISSUED ON 02/22/10; TO CHANGE THE AVD LANGUAGE FOR ITEMS NO. 3 TO REFLECT CORRECT DATE OF OBSERVATION BY CSHO. ALL OTHER ITEMS OF THE CITATION AND PENALTY REMAIN UNCHANGED AND EFFECTIVE. THIS AMENDED CITATION SHALL BE POSTED WITH THE ORIGINAL CITATION FOR AT LEAST THREE WORKING DAYS OR UNTIL THE VIOLATIVE CONDITION IS ABATED, WHICHEVER IS LONGER."

Citation 1 Item 3 Type of Violation: General**3273(a) Working Area**

Permanent floors and platforms shall be free of dangerous projections or obstructions, maintained in good repair, and reasonably free of oil, grease, or water. Where the type of operation necessitates working on slippery floors, such surfaces shall be protected against slipping by using mats, grates, cleats, or other methods which provide equivalent protection. Where wet processes are used drainage shall be maintained and false floors, platforms, mats, or other dry standing places provided:

a) **11/09/09/1 Power Plant:** The Cal OSHA Compliance Engineer observed that employer failed to maintain the floor of the basement at the south end of the building reasonably free of oil, grease and water; and failed to ensure that employees who routinely accessed a sump pump located in the basement to facilitate drainage from #5 Boiler Feedwater pump were protected against slipping while working in the basement;

b) **11/09/09/1 Power Plant:** The Cal OSHA Compliance Engineer observed that employer failed to maintain the floor in the building reasonably free of water leaking from the overhead 150 lb. steam valve

Date By Which Violation Must be Abated:

03/27/2010

Proposed Penalty:

\$ 150.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

State of California

Division of Occupational Safety and Health

Cal/OSHA N. CA PSM District Office (0950663;4037)

1450 Enea Circle, Suite 550

Concord, CA 94520-7996

Inspection Number: 311074876**Inspection Dates:** 11/09/2009-02/16/2010**Issuance Date:** 02/22/2010**CSHO ID:** H1278**Optional Inspection Nbr:** 012-10

Phone: (925) 602-2665 Fax: (925) 602-2668

Citation and Notification of Penalty**Company Name:** Chevron Products Company**Inspection Site:** 841 Chevron Way, Richmond, CA 94801-0006

AMENDED

"THIS CITATION AMENDS CITATION NO. 1 ITEM 4 ISSUED ON 02/22/10 TO WITHDRAW THIS ITEM AND IT'S ATTENDANT CIVIL PENALTY IN IT'S ENTIRETY." ALL OTHER ITEMS OF THE CITATION AND PENALTY REMAIN UNCHANGED AND EFFECTIVE. THIS AMENDED CITATION SHALL BE POSTED WITH THE ORIGINAL CITATION FOR AT LEAST THREE WORKING DAYS OR UNTIL THE VIOLATIVE CONDITION IS ABATED, WHICHEVER IS LONGER."

Citation 1 Item 4 Type of Violation: General**3273(d) Working Area**

Catwalks shall be no less than 18 inches wide and have 6 1/2 feet clear headroom.

Exceptions: 1. When required location dictates, a catwalk may have less overhead clearance if a warning and padding are provided as in (c). And, as per (c) in existing installations where an overhead hazard exists due to clearances of less than 6 1/2 feet above ramps, runways, platforms, or other elevated work areas, such work area shall be relocated and the obstruction removed. If these procedures are impracticable, a suitable warning shall be placed near the obstruction to notify employees of its presence. Where the nature of the hazard is such that padding will increase safety, it shall be installed:

11/09/09/1 Power Plant: The Cal OSHA Compliance Engineer observed that a portion of the first level catwalk lacked 6-1/2 feet clear headroom due to the presence of two large diameter pipes overhead, and had its required width reduced by both a large diameter pipe and a permanently installed ladder in the middle of the catwalk. The Compliance Engineer did not observe a suitable warning near the obstructions.

Date By Which Violation Must be Abated:

WITHDRAWN

Proposed Penalty:

\$ 0.00

Phone: (925) 602-2665 Fax: (925) 602-2668

Compliance Officer/District Manager

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

State of California
Division of Occupational Safety and Health
Cal/OSHA Process Safety Management District Office
1450 Enea Circle, Suite 550 (Index Code 4037)
Concord, CA 94520-7996
Phone: (925) 602-2665 Fax: (925) 602-2668

AMENDED
NOTICE OF PROPOSED PENALTIES

Company Name: Chevron Products Company
Inspection Site: 841 Chevron Way, Richmond, CA 94801-2006
Mailing Address: 841 Chevron Way, Richmond, CA 94801-2006

Issuance Date: 03/04/2010

Reporting ID: 0950663
Index Code: 4037

Summary of Penalties for Inspection Number 311074876

Citation 1, General	= \$	300.00
TOTAL PROPOSED PENALTIES	= \$	300.00

Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form.

If you are paying by credit card (MasterCard and Visa): Please have this form on-hand when you are ready to make your payment. The company name, index code, reporting ID and Citation number(s) will be required to ensure that the payment is accurately posted to your account. Please go to www.dir.ca.gov/dosh to access the secure payment processing site.

If you are paying by check: Mail this Notice of Proposed Penalties, the Penalty Remittance Form, along with a copy of the Citation and Notification of Penalty to:

DEPARTMENT OF INDUSTRIAL RELATIONS
CASHIER, ACCOUNTING OFFICE
P. O. BOX 420603
SAN FRANCISCO, CA 94142-0603

CAL/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions or endorsements do not exist.

DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH - CAL/OSHA
Cashier, Accounting Office
P.O. Box 420603
San Francisco, CA 94142-0603
Phone (415) 703-4291 or (415) 703-4295 FAX (415) 703-3037

PENALTY REMITTANCE FORM

CIVIL PENALTY INFORMATION INSPECTION NUMBER 311074876 REPORTING ID 0950663 INDEX CODE 4037

ESTABLISHMENT NAME Chevron Products Company

CONTACT PERSON _____

PHONE NO. _____

FAX NO. _____

SITE ADDRESS 841 Chevron Way, Richmond

MAILING ADDRESS 841 Chevron Way, Richmond, CA, 948012006

CITATION INFORMATION (Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this citation, remittance is still due on all items that are not appealed.)

Payment is for the following Citation Items: e.g. Citation 1, Items 1-5; Citation 3

TYPE OF PAYMENT ENCLOSED

CHECK OR MONEY ORDER INFORMATION

CHECK ENCLOSED IN THE AMOUNT OF \$ _____

MONEY ORDER ENCLOSED IN THE AMOUNT OF \$ _____

(Please make check or money order payable to CAL/OSHA and mail to the Cashier, Accounting Office, at the above address. Reference the Inspection Number on the "memo" portion of your check or money order.)

Go to www.dir.ca.gov/dosh to access the on-line third party secure payment processing site.

OR Complete this section and fax to (415) 703-3037

CREDIT CARD INFORMATION

VISA OR MASTERCARD CREDIT CARD NO. _____ EXPIRATION DATE _____

CREDIT CARD SECURITY CODE (last 3 digits on back of card) _____

NAME OF CARDHOLDER _____ SIGNATURE _____

CARDHOLDER PHONE NO. _____ FAX NO. _____

AMOUNT OF PAYMENT \$ _____

----- FOR OFFICE USE ONLY -----

AUTHORIZATION NO. _____ DATE PROCESSED _____

PROCESSED BY _____

Please call (415) 703-4291 or 703-4295 or complete the information above and fax to (415) 703-3037

Cal/OSHA-2 PRF Rev 7/08

**EMPLOYER'S SIGNED STATEMENT OF ABATEMENT OF
REGULATORY AND/OR GENERAL VIOLATIONS**

2. EMPLOYER: CHEVRON PRODUCTS COMPANY

ADDRESS: 841 Chevron Way

Richmond, CA 94801 Attn: Tom DiPalma, Safety Team Lead

City

State

Zip

3. The law requires that violations observed during the inspection/investigation completed on 16 Feb 10
of the place of employment located at 841 Chevron Way Richmond, CA 94801 be
corrected within the time limit specified. Please notify the Division as soon as these conditions have been corrected by
returning this completed form. Your response by signing and mailing this form to the issuing office on or before
the compliance date may avoid a follow-up inspection of your facilities. **Failure to timely complete and return this form
may result in issuance of a citation and civil penalty for violation of 8CCR 340.4(c).**

NOTE: This form does not serve as a request for a time extension. If there are serious
problems beyond your control that prevent meeting a specified abatement date, contact the
Division early, well within the 15-day limit allowed for an appeal.

This signed statement or a
summary shall be posted for
three (3) working days at or near
each place the regulatory and/or
general violation(s) referred to
in the citation occurred.

4. PLEASE COMPLETE AND MAIL BY 03/27/10

5. LIST THE SPECIFIC MEASURES & EQUIPMENT TAKEN TO CORRECT EACH CITATION AND ITEM NUMBER OF THE
UNSAFE CONDITIONS AND DATE OF ABATEMENT

[] Continued on additional page

6. All affected employees and their representatives have been informed about abatement activities referenced in this document
in conformance with 8CCR Section 340.4(g). ☐ YES ☐ NO

7. This certifies that all the unsafe conditions listed in the Division's Citation dated _____ have now been
corrected and all submitted abatement information is accurate.

Signature: _____ Date: _____

Name: _____ Date: _____

8. OFFICE USE ONLY

Safety Engineer: _____ Date: _____

District Manager: _____ Date: _____

[] Close / Comments

9. Region 6 District 3 Inspection No. 311074876 Identification No. 311074876 Cal/OSHA Rpt. No. 012 Fiscal Year 10

FEB 22 2010

0. Date mailed or delivered: _____

CAL/OSHA 160 (09/01/00)

**DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
OSHA CITATIONS
CREDIT CARD PAYMENT FORM**

DATE: _____ INSPECTION #: _____
(MM/DD/YY)

COMPANY NAME: _____

DBA: _____

INSPECTION SITE: _____

MAILING ADDRESS: _____

ISSUANCE DATE: _____ TOTAL PENALTIES DUE: _____
(MM/DD/YY)

CALLER NAME: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

CREDIT CARD INFORMATION:

TYPE OF CREDIT CARD: (Check one)

☐

VISA

☐

MASTERCARD

CREDIT CARD NUMBER: _____

SECURITY CODE (3-digit number shown on back of card after credit card no.): _____

EXPIRATION DATE (mm/yy): _____

NAME ON CREDIT CARD (Please print): _____

BILLING ADDRESS: _____

PAYMENT AMOUNT: _____

AUTHORIZATION AMOUNT (Optional): _____

SIGNATURE AUTHORIZATION: _____

PLEASE SEND CONFIRMATION BY: (Check one)

☐

FAX

☐

EMAIL

PLEASE FAX THIS FORM TO (415) 703-3037

FOR USE BY DIR ACCOUNTING ONLY:

PREPARED BY: _____

AUTHORIZATION NUMBER: _____

DATE AUTHORIZED: _____ TAKEN BY PHONE: *Volume License Software*

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH
NORTHERN CALIFORNIA PROCESS SAFETY MANAGEMENT DISTRICT OFFICE
1450 ENEA CIRCLE, SUITE 550
CONCORD, CA 94520-7996

CERTIFIED MAILSM



7006 0100 0003 3074 6360



*Robert
R. R. R.*

CERTIFIED-RRR

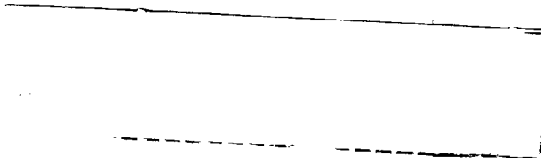
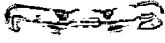
NOTICE OF INSPECTION

To:
Chevron Products Company

and its successors
841 Chevron Way
Richmond, CA 94801-2006

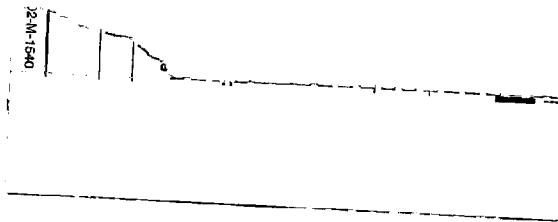
150370





CERTIFIED-RRR

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS



12-M-1540